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SUPPLEMENT <sup>3</sup> TO ATTACHMENT 2.6-A  
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OMB NO.: 0938-0193

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: South Dakota (N/A)

REASONABLE LIMITS ON AMOUNTS FOR NECESSARY MEDICAL  
OR REMEDIAL CARE NOT COVERED UNDER MEDICAID

TN No. 85-12  
Supersedes  
TN No. 85-11

Approval Date 10/21/85

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